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CONFIRMATION NO. 7525

Bib Data Sheet

SERIAL NUMBER 10/724,010	FILING OR 371(c) DATE 11/25/2003 RULE	CLASS 623	GROUP ART UNIT 3733	ATTORNEY DOCKET NO. 2960/116
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APPLICANTS

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**** CONTINUING DATA *******

This application is a CIP of 10/305,652 11/27/2002 PAT 7,468,075
 which is a CIP of 10/160,667 05/28/2002
 which claims benefit of 60/293,488 05/25/2001
 and claims benefit of 60/363,527 03/12/2002
 and claims benefit of 60/380,695 05/14/2002
 and claims benefit of 60/380,692 05/14/2002

**** FOREIGN APPLICATIONS *******

IF REQUIRED, FOREIGN FILING LICENSE GRANTED SMALL ENTITY ****
**** 02/27/2004**

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY MA	SHEETS DRAWING 33	TOTAL CLAIMS 64	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

ADDRESS

75059

TITLE

PATIENT SELECTABLE JOINT ARTHROPLASTY DEVICES AND SURGICAL TOOLS FACILITATING INCREASED ACCURACY, SPEED AND SIMPLICITY IN PERFORMING TOTAL AND PARTIAL JOINT ARTHROPLASTY

FILING FEE RECEIVED 2484	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other <input type="checkbox"/> Credit
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